

MESSA Balance+ is a unique health plan that features a health savings account (HSA) and MESSA's supplemental plans while offering a lower premium and out-of-pocket maximum for members, all while providing MESSA's outstanding personal service and the largest network of providers in Michigan.

- MESSA Balance+ features a health savings account (HSA) and the lowest deductible allowed by the IRS for an HSA-eligible plan: \$1,600 single/\$3,200 family, in 2024. (Deductible is subject to change each Jan. 1, per IRS rules).
- Annual checkups, cancer screenings and certain immunizations are covered at no cost when you go to an in-network provider.
- An extensive list of preventive prescriptions are covered at no cost. View the list at messa.org/FreeRx.
- MESSA Balance+ includes the following in-network features, once deductible is met:
 - \$10 Teladoc Health 24/7 Care (for minor illnesses or injuries)
 - \$10 Teladoc Health Mental Health visit
 - \$25 Teladoc Health Virtual Primary Care visit
 - \$25 copayment for office visits (e.g., primary care physician, obstetrics and gynecology, pediatric visits)
 - \$25 copayment for out-patient mental health and substance use disorder treatment
 - \$25 copayment for chiropractic and osteopathic manipulations, with a combined limit of 12 visits per year
 - \$50 copayment for specialist visits
 - \$50 copayment for urgent care
 - \$200 emergency room copayment, if not admitted
 - 20% coinsurance for services such as lab work and hospitalizations
- Other in-network services included in MESSA Balance+:
 - Occupational therapy, speech therapy, physical therapy and therapeutic massage: 30 visits per year, combined. Therapeutic massage must be performed by an approved provider. Therapeutic massage by a massage therapist is not covered. Coinsurance applies.
 - Durable medical equipment such as crutches, breast pumps and blood pressure monitors are covered when prescribed by a physician and purchased from a payable durable medical equipment provider. Coinsurance applies. Purchases made online or from a retail store are not covered and will not be reimbursed.
- Out-of-network preventive services are not covered.

MESSA Balance+ includes supplemental plans

MESSA's **Accident, Critical Illness** and **Hospital Indemnity** supplemental plans complement your MESSA medical benefits by providing cash payouts for covered injuries, illnesses or hospitalizations for MESSA members and covered dependents. The payouts can be used to cover medical expenses or any other bills (e.g., mortgage, utilities, child care) to provide financial relief when you need it most.

Accident plan

Pays cash benefits when you or a covered dependent experience a covered accidental injury. Includes an organized kids' sports rider that increases payable benefits by 25%.

Critical Illness plan

Pays cash benefits when you or a covered dependent are diagnosed with a covered illness or condition after your coverage effective date. Members receive \$50 a year per covered individual for qualifying health screenings and preventive care, such as certain immunizations for children and adults, mammograms and colonoscopies.

Hospital Indemnity plan

Pays benefits when you or a covered dependent have a hospital stay due to an illness, injury, surgery or childbirth. Pays a lump sum benefit for admission and a daily benefit for a covered hospital stay.

MESSA Balance+ Rx plan

Overview

Extensive list of free prescription drugs

- The MESSA Balance+ Rx plan features an expanded free preventive prescription drug list that includes and expands upon drugs and drug categories required by federal law. Age and gender limits apply. Categories include alcohol dependence, breast cancer prevention, cholesterol, colonoscopy related, contraceptives, fluoride preparation, blood pressure lowering, prenatal vitamins, pre-exposure prophylaxis (PrEP) for HIV, and weight loss.
- Covered at no charge — no deductible, no copayment and no coinsurance.

What you pay for prescriptions from an in-network pharmacy

Types of medications	Up to 34-day supply	90-day supply
After your deductible is met the following copayments or coinsurance apply:		
Generic drugs Members pay the lowest copay for generics, making them the most cost-effective option for treatment.	\$10 copayment	\$30 copayment
Preferred brand-name drugs Brand-name drugs are more expensive than generics.	\$40 copayment	\$120 copayment
Nonpreferred brand-name drugs Includes brand-name drugs for which there's either a generic alternative or a more cost-effective, preferred brand-name drug available.	\$80 copayment	\$240 copayment
Preferred specialty drugs Includes generic and brand-name specialty drugs that are used to treat difficult health conditions.	20% coinsurance with a maximum of \$150 (up to 30-day supply)	Not available
Nonpreferred specialty drugs Includes nonpreferred brand-name specialty drugs that are used to treat difficult health conditions. Members pay more for nonpreferred specialty drugs because there are more cost-effective generic or preferred drugs available.	20% coinsurance with a maximum of \$300 (up to 30-day supply)	Not available
<i>Prescription types (generic, brand-name and specialty) are subject to change without notice. The initial quantity of select specialty drugs may be limited and your cost will be reduced by one-half for this reduced initial fill.</i>		



This is a brief overview of MESSA Balance+. For additional information, including eligibility, limitations and exclusions, please contact MESSA at 800-336-0013.

